

APPLICATION FOR INTERNSHIP  
PHOENIX OFFICE

NAME \_\_\_\_\_ SOC. SEC. NO. \_\_\_\_\_

ADDRESS \_\_\_\_\_ TELEPHONE \_\_\_\_\_

CITY, STATE, ZIP \_\_\_\_\_ BIRTH DATE \_\_\_\_\_

PRESENT  
COLLEGE/UNIVERSITY \_\_\_\_\_

MAJOR \_\_\_\_\_ CLASS \_\_\_\_\_ GPA \_\_\_\_\_

ADVISOR \_\_\_\_\_ TELEPHONE \_\_\_\_\_

EXTRA CURRICULAR ACTIVITIES \_\_\_\_\_

ORGANIZATIONS OR CLUB MEMBERSHIPS AND OFFICES HELD (IF ANY)

PAST EMPLOYMENT OR VOLUNTEER EXPERIENCES AND NATURE OF TASKS

BRIEF EXPLANATION OF WHY YOU WISH TO SERVE AS AN INTERN

PLEASE ATTACH ANY ADDITIONAL INFORMATION SUCH AS RESUMES AND  
BIOGRAPHIES THAT YOU BELIEVE WILL BE OF ASSISTANCE IN EVALUATING  
YOUR APPLICATION. (SEND TO:)

SENATOR JOHN MC CAIN  
ATTN: BABETTE DONALDSON  
5353 N. 16<sup>TH</sup> STREET #105  
PHOENIX, ARIZONA 85016  
(602) 952-2410  
(FAX) 952-8702